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jc759 U.S. PTO

EXPRESS MAIL CERTIFICATE

2/13/02 2767723 63 105

Date \_\_\_\_\_ Label No. \_\_\_\_\_  
I hereby certify that, on the date indicated above, this paper or  
fee was deposited with the U.S. Postal Service & that it was  
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Patents, Washington, DC 20231 by "Express Mail Post Office to  
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jc997 U.S. PTO  
10/075779  
02/13/02

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07278

PATENT TRADEMARK OFFICE

Docket No: 2309/OK299

**DARBY & DARBY P.C.**

805 Third Avenue  
New York, New York 10022  
212-527-7700

PATENT APPLICATION

Box

Assistant Commissioner for Patents  
Washington, DC 20231

Sir:

Enclosed please find an application for United States patent as identified below:

Inventor/s (name ALL inventors): Satoshi MIZUTANI; Kouichi <sup>YAMAKI</sup> ~~YMAKI~~,  
Yuuki NODA

Title: HYGIENIC ABSORBENT ARTICLE

including the items indicated:

1. Specification and 22 claims: 2 indep.; 20 dep.;    multiple dep.;  
including 37 page(s) of written description; 7 page(s) of claims;  
1 page(s) of abstract.
2. ☒ Drawings, 6 sheets (Figs. 1-11)
3. ☒ Executed Declaration/Power of Attorney  
☐ Unexecuted Declaration/Power of Attorney

4. ☒ Assignment for recording to: UNI-CHARM CORPORATION ✓

☐ Assignment was recorded at Reel No. , Frame No. , on .

☒ Pursuant to 37 C.F.R. §1.215(b), please print the following assignment information on the face of the published application:

Assignee: Uni-Charm Corporation

5. ☒ Priority is claimed under 35 U.S.C. §119(b) of:

Country: Japan  
Number: 2001-48479  
Date: February 23, 2001

Country: Japan  
Number: 2001-169004  
Date: June 5, 2001

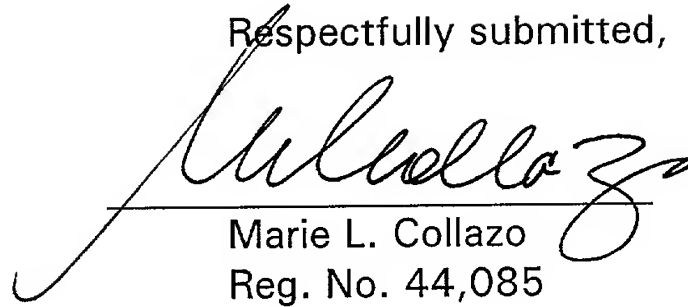
A certified copy of the prior document ☒ is enclosed ☐ will follow  
☐ was filed in a previous application.

6. ☒ Payment in amount of \$816.00, (\$776 filing; \$40 recording)  
in the form of  
☒ check  
☐ deposit account no. 04-0100  
☐ credit card (see attached form)  
(See attached **Fee Computation Sheet**)

7. [X] Information Disclosure Statement

Date: February 13, 2002

Respectfully submitted,



Marie L. Collazo  
Reg. No. 44,085

2002/02/13

PATENT FEE COMPUTATION SHEET

	No. of Claims Presented	Extra Claims Previously Paid For	Number of Extra Claims	Rate
Basic Fee . . . . .				\$740.00
Total Claims	22 - 20	- 0 = 2	x \$18.00	\$36.00
Independent Claims	2 - 3	- 0 = 0	x \$84.00	\$0.00
Multiple Dependent Claims		- if so, add	\$280.00	\$0.00
Surcharge for late submission of filing fee and/or declaration (\$130.00)				\$0.00
SUBTOTAL . . . . .				\$776.00
<input type="checkbox"/> Small Entity REDUCTION (Half of Subtotal)				\$0.00
Fee for recordation of assignment (\$40.00)				\$40.00
Charge for filing non-English language application (\$130.00)				\$0.00
TOTAL . . . . .				\$816.00